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FLORIDA PROFIT/NON PROFIT CORPORATION
Prime Nursing Assisted Living Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$70.00

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T. Burch 11/8/2010

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Prime Nursing Assisted Living Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

89 Dobson St
Orlando, FL 32805

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Nursing

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ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Angela Laing-Anderson, Dir.
Address: 89 Dobson St.
Orlando, FL 32805

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Angela Laing-Anderson
Address: 89 Dobson St.
Orlando, FL 32805

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Stefanie Hernandez
Address: 1220 N. Market St., Ste 808
Wilmington, DE 19801

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

/s/ Angela Laing-Anderson
Required Signature/Registered Agent

10/8/2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Stefanie Hernandez
Required Signature of Incorporator

10/8/2010
Date